Management Protocol for Covid-19 Acute Respiratory Disease (Version 07)

A.
- History of travel to or residence in an **affected area within past 14 days**
- History of close contact with a confirmed or probable COVID-19 case within past 14 days
  **affected area means area with confirmed cases in Myanmar and countries with confirmed cases**

B.
- Presenting fever, symptoms of acute respiratory disease (e.g., cough, shortness of breath)

C.
- Presenting fever, symptoms of severe acute respiratory disease with no other clear aetiology

At triage area

- Report to respective State and Regional or District or Township Health Department
- Facility quarantine for 21 days
- Follow CEU guidelines for specimen collection

- Isolate the patient in a separate room (e.g., Fever room)
- Take strict IPC measures depending on severity
- Take complete and detail history and physical examination
- Inform immediately to DoMS [09 449621202], CEU [067 3420268], State and Regional or District or Township Health Department
- Inform Regional/ Facility Level Clinical Management Committee

Person Under Investigation (PUI) for suspected pneumonia

- Move the patient to isolation room
- Take specimen and send to NHL (To follow specimen collection guidelines)
- If clinician strongly suspect possibility of COVID-19 infection, second swab should be considered
- Follow “Clinical Management Guidelines for Corona virus disease (COVID-19)”

Mild pneumonia (PUI)
- Symptomatic treatment

  - Result (-)
  - Discharge
  - Discharge criteria
  - Discharge message

  - Recover

  - Result (+)

Pneumonia (Suspected)
- Symptomatic treatment
- Oral antibiotics

  - Result (-)
  - Discharge
  - Discharge criteria
  - Discharge message

  - Result (+)

Severe Pneumonia (Suspected)
- (If any of following signs/symptoms is present)
  - Respiratory rate > 30 breaths/min
  - Severe respiratory distress
  - SpO₂ ≤ 93% on room air
  - Systolic Blood Pressure ≤ 100 mmHg
  - Altered mental status (GCS <15)

  - High flow O₂ 5L/min
  - Supportive treatment including fluid therapy
  - IV antibiotics
  - Treatment of complications
  - Assess for ventilator & specialist care

Confirmed case
- Supportive treatment including fluid therapy
- Antibiotic
- Antiviral/HCQ should be considered
- Treatment of complications
- Refer to designated hospital with standard precaution and considering risk and benefit
- Isolate patients for 21 days (after last exposure)

Death – proper disposal of the dead person

Attendance of patients in hospital, OPD and community clinics